ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*MN*	7091	14/6
O.I.P.E. CLASSIFIER			12/20/00
FORMALITY REVIEW	*AE*	Jc 900	11-14-C0
RESPONSE FORMALITY REVIEW	A. M	Jc 580	12-20-0N

INDEX OF CLAIMS

✔	...... Rejected	N	...... Non-elected
=	...... Allowed	I	...... Interference
–	(Through numeral)... Canceled	A	...... Appeal
÷	...... Restricted	O	...... Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
1	1			51			101	
2	2			52			102	
6	3			53			103	
7	4			54			104	
8	5			55			105	
9	6			56			106	
	7			57			107	
	8			58			108	
12	9			59			109	
13	10			60			110	
14	11			61			111	
	12			62			112	
	13			63			113	
17	14			64			114	
	15			65			115	
	16			66			116	
18	17			67			117	
	18			68			118	
	19			69			119	
20	20			70			120	
21	21			71			121	
22	22			72			122	
23	23			73			123	
26	24			74			124	
27	25			75			125	
	26			76			126	
29	27			77			127	
30	28			78			128	
31	29			79			129	
33	30			80			130	
34	31			81			131	
35	32			82			132	
36	33			83			133	
38	34			84			134	
37	35			85			135	
	36			86			136	
23	37			87			137	
24	38			88			138	
	39			89			139	
	40			90			140	
	41			91			141	
	42			92			142	
	43			93			143	
	44			94			144	
	45			95			145	
	46			96			146	
	47			97			147	
	48			98			148	
	49			99			149	
	50			100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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